

FILE 'HCAPLUS' ENTERED AT 12:11:57 ON 29 APR 2004  
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FILE 'MEDLINE' ENTERED AT 12:11:57 ON 29 APR 2004

=> d his

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E PSEUDOEPHEDRIN/CN

L1 8 S E4-E11

FILE 'HCAPLUS, BIOSIS, EMBASE, MEDLINE' ENTERED AT 12:11:57 ON 29 APR 2004

=> s l1

L2 4443 L1

=> s l2 and migrain

L3 0 L2 AND MIGRAIN

=> s l2 and migrain?

L4 14 L2 AND MIGRAIN?

=> dup rem l4

PROCESSING COMPLETED FOR L4

L5 14 DUP REM L4 (0 DUPLICATES REMOVED)

=> d l5 abs ibib kwic hitrn 1-14

L5 ANSWER 1 OF 14 HCAPLUS COPYRIGHT 2004 ACS on STN

AB A method for systemically delivering a pharmaceutical composition to a human or animal comprises forming an orifice in a nail of a human or animal by means of a laser-based device and applying a pharmaceutical composition in the orifice, wherein the method provides a controlled release of the pharmaceutical composition The pharmaceutical composition may be in the form of a

liquid, semisolid, solid, solution, gel, emulsion, or powder.

ACCESSION NUMBER: 2003:656550 HCAPLUS

DOCUMENT NUMBER: 139:185702

TITLE: Method for systemic drug delivery through the nail

INVENTOR(S): Bruno-Raimondi, Alfredo Emilio; Karabelas, Argeris  
Jerry

PATENT ASSIGNEE(S): Novartis A.-G., Switz.; Novartis Pharma G.m.b.H.

SOURCE: PCT Int. Appl., 18 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

DELACROIX

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003068197	A1	20030821	WO 2003-EP1345	20030211
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LT, LU, LV, MA, MD, MK, MN, MX, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SE, SG, SK, TJ, TM, TN, TR, TT, UA, US, UZ, VC, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, SE, SI, SK, TR				
PRIORITY APPLN. INFO.:			GB 2002-3276	A 20020212
IT	Headache			
	(migraine; method for systemic drug delivery through nails)			
IT	50-02-2, Dexamethasone 50-06-6, Phenobarbital, biological studies 50-14-6, Ergocalciferol 50-23-7, Hydrocortisone 50-24-8, Prednisolone 50-28-2, Estradiol, biological studies 50-48-6, Amitriptyline 50-49-7, Imipramine 50-55-5, Reserpine 50-78-2, Acetylsalicylic acid 50-81-7, Ascorbic acid, biological studies 51-21-8, Fluorouracil 51-34-3, Scopolamine 51-43-4, Epinephrine 51-48-9, Levothyroxine, biological studies 51-61-6, Dopamine, biological studies 52-01-7, Spironolactone 52-53-9, Verapamil 52-86-8, Haloperidol 53-03-2, Prednisone 53-86-1, Indomethacin 54-11-5, Nicotine 54-31-9, Furosemide 55-56-1, Chlorohexidine 55-63-0, Nitroglycerine 56-40-6, Aminoacetic acid, biological studies 56-54-2, Quinidine 56-75-7, Chloramphenicol 56-85-9, Levoglutamide, biological studies 57-27-2, Morphine, biological studies 57-41-0, Phenytoin 57-63-6, Ethinylestradiol 57-83-0, Progesterone, biological studies 58-05-9, Folinic acid 58-08-2, Caffeine, biological studies 58-22-0, Testosterone 58-32-2, Dipyrindamole 58-55-9, Theophylline, biological studies 58-73-1, Diphenhydramine 58-85-5, Biotin 58-93-5, Hydrochlorothiazide 59-05-2, Methotrexate 59-30-3, Folic acid, biological studies 59-42-7, Phenylephrine 59-43-8, Thiamine, biological studies 59-67-6, Nicotinic acid, biological studies 59-92-7, Levodopa, biological studies 60-54-8, Tetracycline 61-33-6, Penicillin G, biological studies 62-49-7, Choline 65-23-6, Pyridoxine 66-22-8, Uracil, biological studies 68-19-9, Cyanocobalamin 68-22-4, Norethisterone 68-26-8, Retinol 68-89-3, Dipyrone 69-53-4, Ampicillin 69-72-7, Salicylic acid, biological studies 72-69-5, Nortriptyline 76-22-2, Camphor 76-25-5, Triamcinolone acetone 76-57-3, Codeine 77-36-1, Chlorthalidone 79-83-4, Pantothenic acid 81-13-0, Dexpanthenol 83-43-2, Methylprednisolone 83-88-5, Riboflavin, biological studies 87-08-1, Penicillin V 87-33-2, Isosorbide dinitrate 90-82-4, Pseudoephedrine 94-09-7, Benzocaine 94-24-6, Tetracaine 97-59-6, Allantoin 98-92-0, Nicotinamide 99-66-1, Valproic acid 103-90-2, Acetaminophen 113-15-5, Ergotamine 113-92-8 114-07-8, Erythromycin 125-28-0, Dihydrocodeine 125-29-1, Hydrocodone 125-71-3, Dextromethorphan 126-07-8, Griseofulvin 137-58-6, Lidocaine 146-17-8, Flavin mononucleotide 146-22-5, Nitrazepam 153-18-4, Rutoside 298-46-4, Carbamazepine 299-42-3, Ephedrine 302-79-4, Tretinoin 303-49-1, Clomipramine 315-30-0, Allopurinol 322-35-0, Benserazide 364-62-5, Metoclopramide 378-44-9, Betamethasone 396-01-0, Triamterene 437-38-7, Fentanyl 439-14-5, Diazepam 466-99-9, Hydromorphone 469-62-5, Dextropropoxyphene 511-12-6, Dihydroergotamine 514-65-8, Biperiden 520-85-4, Medroxyprogesterone 525-66-6, Propranolol 541-15-1, Levocarnitine 552-79-4, N-Methylephedrine 555-30-6, Methyldopa 564-25-0, Doxycycline 599-79-1, Sulfasalazine 603-00-9, Proxyphylline 616-91-1,			

Acetylcysteine 721-50-6, Prilocaine 723-46-6, Sulfamethoxazole 738-70-5, Trimethoprim 797-63-7, Levonorgestrel 846-49-1, Lorazepam 1197-18-8, Tranexamic acid 1400-61-9, Nystatin 1403-66-3, Gentamicin 1404-04-2, Neomycin 1404-26-8, Polymyxin B 1404-90-6, Vancomycin 1406-18-4, Vitamin E 1490-04-6, Menthol 1622-61-3, Clonazepam 1812-30-2, Bromazepam 1951-25-3, Amiodarone 2098-66-0, Cyproterone 2438-72-4, Bufexamac 2609-46-3, Amiloride 2955-38-6, Prazepam 3572-43-8, Bromhexine 3737-09-5, Disopyramide 3930-20-9, Sotalol 4205-90-7, Clonidine 4419-39-0, Beclomethasone 4618-18-2, Lactulose 4759-48-2, Isotretinoin 5104-49-4, Flurbiprofen 5786-21-0, Clozapine 6493-05-6, Pentoxifylline 6533-00-2, Norgestrel 6809-52-5, Teprenone 7085-55-4, Troxerutin 8049-47-6, Pancreatin 9001-62-1, Lipase 9002-72-6, Somatotropin 9004-10-8, Insulin, biological studies 9004-61-9, Hyaluronic acid 9005-49-6, Heparin, biological studies 10118-90-8, Minocycline 10238-21-8, Glibenclamide 10540-29-1, Tamoxifen 11032-41-0, Dihydroergotoxin 11041-12-6, Cholestyramine 11103-57-4, Vitamin A 13292-46-1, Rifampicin 13392-18-2, Fenoterol 14611-51-9, Selegiline 14838-15-4, Phenylpropanolamine 15307-86-5, Diclofenac 15663-27-1, Cisplatin 15676-16-1, Sulpiride 15686-71-2, Cefalexin 15687-27-1, Ibuprofen 16051-77-7, Isosorbide mononitrate 16110-51-3, Cromoglycic acid 16662-47-8, Gallopamil 17902-23-7, Tegafur 18559-94-9, Salbutamol 18683-91-5, Ambroxol 19216-56-9, Prazosin 20830-75-5, Digoxin 21829-25-4, Nifedipine 22071-15-4, Ketoprofen 22204-53-1, Naproxen 22916-47-8, Miconazole 23031-25-6, Terbutaline 23593-75-1, Clotrimazole 24356-60-3, Cefatrexyl 25614-03-3, Bromocriptine 25655-41-8, Povidoneiodine 25812-30-0, Gemfibrozil 25953-19-9, Cefazolin 26787-78-0, Amoxicillin 26839-75-8, Timolol 27848-84-6, Nicergoline 28860-95-9, Carbidopa 28981-97-7, Alprazolam 29094-61-9, Glipizide 29122-68-7, Atenolol 30516-87-1, Zidovudine 31329-57-4, Naftidrofuryl 33419-42-0, Etoposide 34580-13-7, Ketotifen 36322-90-4, Piroxicam 36505-84-7, Buspirone 36894-69-6, Labetalol 37517-28-5, Amikacin 37517-30-9, Acebutolol 38304-91-5, Minoxidil 38396-39-3, Bupivacaine 39562-70-4, Nitrendipine 41294-56-8, Alfacalcidol 41575-94-4, Carboplatin 41859-67-0, Bezafibrate 42399-41-7, Diltiazem 47931-85-1, Salcatonin 49562-28-9, Fenofibrate 50679-08-8, Terfenadine 51333-22-3, Budesonide 51384-51-1, Metoprolol 51481-61-9, Cimetidine 52468-60-7, Flunarizine 53179-11-6, Loperamide 53994-73-3, Cefaclor 54024-22-5, Desogestrel 54063-53-5, Propafenone 54182-58-0, Sucralfate 54910-89-3, Fluoxetine 55142-85-3, Ticlopidine 55268-75-2, Cefuroxime 55837-25-7, Buflomedil 55985-32-5, Nicardipine 56030-54-7, 57808-66-9, Domperidone 58001-44-8, Clavulanic acid 59122-46-2, Misoprostol 59277-89-3, Acyclovir 59467-70-8, Midazolam 60166-93-0, Iopamidol 62571-86-2, Captopril 63527-52-6, Cefotaxime 63590-64-7, Terazosin 64221-86-9, Imipenem 65277-42-1, Ketoconazole 66085-59-4, Nimodipine 66108-95-0, Iohexol

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(method for systemic drug delivery through nails)

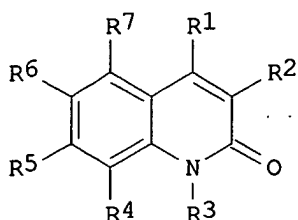
IT 90-82-4, Pseudoephedrine

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(method for systemic drug delivery through nails)

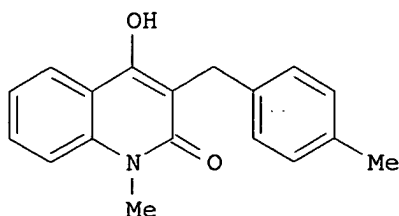
REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 2 OF 14 HCAPLUS COPYRIGHT 2004 ACS on STN  
GI

DELACROIX



I



II

AB Title compds. I [wherein R1 = H, halo, OH, N(R8)2, or (un)substituted alkyl, alkenyl, alkoxy, alkylthio, alkanoyl(oxy), alkoxy carbonyl, aryl, aralkyl, aryloxy, aralkoxy, arylthio, aroyl, or aroyloxy; R2 = (un)substituted benzyl, alkyl, alkenyl, or aroyl; R3 = (un)substituted alkyl, alkenyl, alkynyl, aryl, or aralkyl; R4-R7 = independently H, halo, or (un)substituted alkyl; or R3 and R4 may be joined together with the atoms to which they are attached to form a monocyclic ring; R8 = H or (un)substituted alkyl, alkenyl, or alkanoyl; and pharmaceutically acceptable salts, hydrates, esters, or tautomers thereof] were prepared as prostaglandin E receptor ligands (no data). For example, reaction of N-methyl-4-hydroxy-2-quinolone with 4-methylbenzaldehyde in the presence of Et3SiH and TFA in toluene gave II. I and pharmaceutical compns. comprising I may be useful for the treatment of pain, fever, inflammation, and a broad variety of prostaglandin E mediated diseases and conditions (no data).

ACCESSION NUMBER: 2003:491224 HCAPLUS  
DOCUMENT NUMBER: 139:69162  
TITLE: Preparation of quinolinones as prostaglandin E receptor ligands for treatment of pain, fever, inflammation, and other prostanoid receptor mediated disorders  
INVENTOR(S): Dube, Daniel; Deschenes, Denis; Fortin, Rejean; Girard, Yves  
PATENT ASSIGNEE(S): Merck Frosst Canada & Co., Can.  
SOURCE: PCT Int. Appl., 75 pp.  
CODEN: PIXXD2  
DOCUMENT TYPE: Patent  
LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003051878	A1	20030626	WO 2002-CA1914	20021211
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				

PRIORITY APPLN. INFO.: US 2001-340439P P 20011214  
OTHER SOURCE(S): MARPAT 139:69162  
IT Headache

(**migraine**; preparation of quinolinone prostaglandin E receptor ligands for treatment of pain, fever, inflammation, and other prostanoid mediated diseases)

IT 50-78-2, Aspirin 51-43-4, Epinephrine 58-08-2, Caffeine, biological studies 59-42-7, Phenylephrine 62-44-2, Phenacetin 76-57-3, Codeine 77-22-5, Caramiphen 77-23-6, Carbetapentane **90-82-4**, Pseudoephedrine 101-40-6, Propylhexedrine 103-90-2, Acetaminophen 125-29-1, Hydrocodone 125-71-3, Dextromethorphan 526-36-3, Xylometazoline 835-31-4, Naphazoline 1309-42-8, Magnesium hydroxide 1491-59-4, Oxymetazoline 8050-81-5, Simethicone 14838-15-4, Phenylpropanolamine 15687-27-1, Ibuprofen 21645-51-2, Aluminum hydroxide, biological studies 22071-15-4, Ketoprofen 22204-53-1, Naproxen 33817-09-3 56695-65-9, Rosaprostol 59122-46-2, Misoprostol 70667-26-4, Ornoprostil 73121-56-9, Enprostil 77287-05-9, Rioprostil 162011-90-7, Rofecoxib 169590-42-5, Celecoxib 181695-72-7, Valdecoxib 198470-84-7, Parecoxib 202409-33-4, Etoricoxib

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (co-administration agent; preparation of quinolinone prostaglandin E receptor ligands for treatment of pain, fever, inflammation, and other prostanoid mediated diseases)

IT **90-82-4**, Pseudoephedrine

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (co-administration agent; preparation of quinolinone prostaglandin E receptor ligands for treatment of pain, fever, inflammation, and other prostanoid mediated diseases)

REFERENCE COUNT: 6 THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 3 OF 14 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED.  
 on STN

AB The goal of this paper is to review how preexisting ocular conditions may be affected by altitude exposure. Such preexisting conditions include dry eye problems, monocular visual loss, and potential problems following refractive surgery procedures, as well as the possible changes associated with some forms of retinal and optic nerve diseases. Although most such altitude-related visual difficulties are relatively minor, some have resulted in serious morbidity or even death at high altitude. This review will give the reader background regarding these potentially debilitating conditions in order to better prepare for exposure to high altitude environments.

ACCESSION NUMBER: 2004026182 EMBASE  
 TITLE: Going to high altitude with preexisting acular conditions.  
 AUTHOR: Mader T.H.; Tabin G.  
 CORPORATE SOURCE: Dr. T.H. Mader, Alaska Native Medical Center, Anchorage, AK 99508, United States. farpointak@gci.net  
 SOURCE: High Altitude Medicine and Biology, (2003) 4/4 (419-430).  
 Refs: 35  
 ISSN: 1527-0297 CODEN: HAMBB7  
 COUNTRY: United States  
 DOCUMENT TYPE: Journal; General Review  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 012 Ophthalmology  
 027 Biophysics, Bioengineering and Medical Instrumentation  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 CT Medical Descriptors:

DELACROIX

\*eye . . . SI, side effect  
systemic disease: SI, side effect  
retina hemorrhage  
diabetic retinopathy: CO, complication  
retina blood vessel occlusion  
retina detachment: SU, surgery  
retina macula age related degeneration

**migraine**

stroke

human

review

priority journal

cholinergic receptor blocking agent: AE, adverse drug reaction

antihypertensive agent: AE, adverse drug reaction

clonidine: AE, adverse drug reaction

propranolol: AE, adverse. . .

RN. . . 3506-09-0, 4199-09-1, 525-66-6; (reserpine) 50-55-5, 8001-95-4;  
(methyldopa) 555-29-3, 555-30-6; (amitriptyline) 50-48-6, 549-18-8;  
(atropine plus diphenoxylate) 55840-97-6; (ephedrine) 299-42-3, 50-98-6;  
(pseudoephedrine) **345-78-8, 7460-12-0, 90-82-4**  
; (tetrazoline) 522-48-5, 84-22-0; (carboxymethylcellulose) 8050-38-2,  
9000-11-7, 9004-32-4, 9050-04-8; (timolol maleate) 26921-17-5;  
(acetazolamide) 1424-27-7, 59-66-5; (latanoprost) 130209-82-4;  
(brimonidine) 59803-98-4

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AB Most patients with acute and chronic headache disorders have  
**migraine**, tension-type, or cluster headache. However, the many  
pain-sensitive structures of the head and neck provide numerous possible  
secondary causes of headache. As a result of pain innervation patterns,  
pain location can be misleading. Careful analysis of data from the patient  
history, physical and neurologic examination, and diagnostic tests leads  
to correct diagnosis in most cases. Accurate diagnosis, in turn, leads to  
specific and efficacious therapy for most patients with headache disorders.

ACCESSION NUMBER: 2004086152 EMBASE

TITLE: [The many causes of headache].

BAS AGRISI NEDENLERI.

AUTHOR: Levin M.

CORPORATE SOURCE: Dr. M. Levin, Dept. of Med. (Neurology)/Psychiat.,  
Dartmouth Medical School, Hanover, NH, United States

SOURCE: SENDROM, (2003) 15/12 (77-89).

Refs: 14

ISSN: 1016-5134 CODEN: SENDEY

COUNTRY: Turkey

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 008 Neurology and Neurosurgery

037 Drug Literature Index

038 Adverse Reactions Titles

LANGUAGE: Turkish

SUMMARY LANGUAGE: English

AB Most patients with acute and chronic headache disorders have  
**migraine**, tension-type, or cluster headache. However, the many  
pain-sensitive structures of the head and neck provide numerous possible  
secondary causes of. . .

CT Medical Descriptors:

\*headache: ET, etiology

\*headache: SI, side effect

**migraine**

tension headache  
 cluster headache  
 nociception  
 anamnesis  
 physical examination  
 neurologic examination  
 diagnostic test  
 diagnostic accuracy  
 human  
 review  
 antiinfective agent: AE, adverse drug reaction  
 griseofulvin: AE, adverse drug reaction  
 nalidixic acid: AE, adverse drug. . .

RN. . . 54965-24-1; (dexamphetamine) 1462-73-3, 51-63-8, 51-64-9;  
 (methylphenidate) 113-45-1, 298-59-9; (phenothiazine) 92-84-2; (diclofenac  
 potassium) 15307-81-0; (dipyridamole) 58-32-2; (levodopa) 59-92-7;  
 (piroxicam) 36322-90-4; (pseudoephedrine) **345-78-8**,  
**7460-12-0, 90-82-4**; (diclofenac) 15307-79-6, 15307-86-5

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AB **Migraine** is more common in women. Female **migraineurs**  
 outnumber their male counterparts three to one. **Migraine** is most  
 prevalent between 25 and 55 years of age; prevalence rates start to  
 decrease in men and women in their early 40s. The incidence of late-onset  
**migraine** is low. The epidemiologic trends associated with this  
 disease indicate that clinicians must be aware of typical and atypical  
 manifestations of **migraine**, especially in the subpopulations of  
 women and the elderly, to properly diagnose primary **migraine**,  
 exclude secondary causes, and treat and manage this disease properly.

ACCESSION NUMBER: 2003155539 EMBASE  
 TITLE: **Migraine** in special populations.  
 AUTHOR: Silberstein S.D.; Capobianco D.J.; Dodick D.W.  
 CORPORATE SOURCE: Dr. S.D. Silberstein, Thomas Jefferson University Hospital,  
 Gibbon Building, 111 South 11th Street, Philadelphia, PA  
 19107, United States. stephen.silberstein@mail.tju.edu  
 SOURCE: Neurology, (8 Apr 2003) 60/7 SUPPL. 2 (S50-S57).  
 Refs: 57  
 ISSN: 0028-3878 CODEN: NEURAI

COUNTRY: United States  
 DOCUMENT TYPE: Journal; Conference Article  
 FILE SEGMENT: 008 Neurology and Neurosurgery  
 017 Public Health, Social Medicine and Epidemiology  
 020 Gerontology and Geriatrics  
 037 Drug Literature Index  
 038 Adverse Reactions Titles

LANGUAGE: English  
 SUMMARY LANGUAGE: English

TI **Migraine** in special populations.

AB **Migraine** is more common in women. Female **migraineurs**  
 outnumber their male counterparts three to one. **Migraine** is most  
 prevalent between 25 and 55 years of age; prevalence rates start to  
 decrease in men and women in their early 40s. The incidence of late-onset  
**migraine** is low. The epidemiologic trends associated with this  
 disease indicate that clinicians must be aware of typical and atypical  
 manifestations of **migraine**, especially in the subpopulations of  
 women and the elderly, to properly diagnose primary **migraine**,  
 exclude secondary causes, and treat and manage this disease properly.

CT Medical Descriptors:

\*migraine: DI, diagnosis  
\*migraine: DT, drug therapy  
\*migraine: EP, epidemiology

sex difference  
age  
prevalence  
incidence  
clinical feature  
physician  
disease association  
disease classification  
neuropathology  
confusion: SI, side effect  
sedation  
side effect: SI, side effect  
lethargy: SI, side effect  
headache: CO, complication  
headache: SI, side. . .

RN. . . (flunarizine) 30484-77-6, 52468-60-7; (prednisone) 53-03-2;  
(tetracycline) 23843-90-5, 60-54-8, 64-75-5; (cotrimoxazole) 8064-90-2;  
(aminophylline) 317-34-0; (theophylline) 58-55-9, 5967-84-0, 8055-07-0,  
8061-56-1, 99007-19-9; (pseudoephedrine) **345-78-8**,  
**7460-12-0**, **90-82-4**; (nitrate) 14797-55-8; (nicotinic  
acid) 54-86-4, 59-67-6; (dipyridamole) 58-32-2; (nifedipine) 21829-25-4;  
(methyldopa) 555-29-3, 555-30-6; (reserpine) 50-55-5, 8001-95-4;  
(hydralazine) 304-20-1, 86-54-4; (quinidine). . .

L5 ANSWER 6 OF 14 HCAPLUS COPYRIGHT 2004 ACS on STN

AB This invention is a safe and effective composition and method for treating  
acute **migraine** attacks using pseudoephedrine, acetaminophen, and  
other agents in an orally administrated form to alleviate the pain and  
cluster of symptoms characteristic of **migraine** attacks such as  
nausea, photophobia, phonophobia, and functional disabilities as well as  
the prodrome phase of a **migraine** attack.

ACCESSION NUMBER: 2002:522646 HCAPLUS

DOCUMENT NUMBER: 137:83677

TITLE: **Migraine** medicine and method of treating the  
same without caffeine

INVENTOR(S): Imanzahrai, Ashkan

PATENT ASSIGNEE(S): USA

SOURCE: U.S. Pat. Appl. Publ., 6 pp., Division of U.S. Ser.  
No. 593,238.

CODEN: USXXCO

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2002091162	A1	20020711	US 2002-37516	20020104
US 6642243	B1	20031104	US 2000-593238	20000614
US 2002099060	A1	20020725	US 2002-37517	20020104
PRIORITY APPLN. INFO.:			US 1999-144973P P	19990722
			US 2000-593238 A3	20000614

TI **Migraine** medicine and method of treating the same without  
caffeine

AB This invention is a safe and effective composition and method for treating  
acute **migraine** attacks using pseudoephedrine, acetaminophen, and

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other agents in an orally administrated form to alleviate the pain and cluster of symptoms characteristic of **migraine** attacks such as nausea, photophobia, phonophobia, and functional disabilities as well as the prodrome phase of a **migraine** attack.

ST oral pseudoephedrine acetaminophen acute **migraine**

IT Drug delivery systems  
(caplets; solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

IT Drug delivery systems  
(capsules; solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

IT Antimigraine agents  
Human  
(solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

IT Drug delivery systems  
(tablets; solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

IT **90-82-4**, Pseudoephedrine 103-90-2, Acetaminophen  
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

IT **90-82-4**, Pseudoephedrine  
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(solid oral dosage forms containing pseudoephedrine and acetaminophen for treatment of acute **migraine** attack)

L5 ANSWER 7 OF 14 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED.  
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ACCESSION NUMBER: 2002086350 EMBASE  
TITLE: (3) Facial pain.  
AUTHOR: Dowson A.J.  
SOURCE: Pharmaceutical Journal, (16 Feb 2002) 268/7185 (215-217).  
Refs: 13  
ISSN: 0031-6873 CODEN: PHJOAV  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 008 Neurology and Neurosurgery  
011 Otorhinolaryngology  
037 Drug Literature Index  
LANGUAGE: English

CT Medical Descriptors:  
\*face . . . zoster  
diplopia  
rash: DT, drug therapy  
temporomandibular joint disorder: DI, diagnosis  
temporomandibular joint disorder: DT, drug therapy  
temporomandibular joint disorder: ET, etiology  
temporomandibular joint disorder: SU, surgery  
bite  
**migraine**  
muscle contraction  
human  
controlled study  
article  
antibiotic agent: DT, drug therapy  
vasoconstrictor agent: DT, drug therapy

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decongestive agent: DT, drug therapy  
decongestive agent: PO, oral drug administration  
pseudoephedrine: . . .

RN (pseudoephedrine) 345-78-8, 7460-12-0, 90-82-4  
; (carbamazepine) 298-46-4, 8047-84-5; (valproic acid) 1069-66-5, 99-66-1;  
(baclofen) 1134-47-0; (clonazepam) 1622-61-3; (gabapentin) 60142-96-3;  
(calamine) 12122-17-7, 12196-21-3, 14476-25-6, 67479-94-1, 8011-96-9;  
(capsaicin). . .

L5 ANSWER 8 OF 14 HCAPLUS COPYRIGHT 2004 ACS on STN

AB The present invention relates to a novel rapid-acting freeze-dried pharmaceutical composition useful for the treatment of **migraine** and associated symptoms at a reduced total dose of active substance than required for oral administration in the form of a tablet. The composition contains a porous matrix network of a water soluble or water dispersible carrier material, a pharmaceutically active substance(s), organoleptic additives such as sweetening agents, flavoring agents, and coloring agents, pharmaceutically acceptable preservatives, solubilizing agents, surface active agents and/or buffering agents. The pharmaceutical composition optionally may contain other additives such as permeation enhancers, chelating salts and stabilizing agents. Advantages of the invention are: (1) rapid onset of action due to the rapid absorption of the active substance through oral mucosa, (2) reduced dosage of the drugs as absorption through oral mucosa bypasses the first-pass metabolism and overcomes possible degradation in the gastrointestinal tract, (3) easy to administer to pediatric and geriatric patients, and (4) medicament can be taken without water. For example, tablets were prepared by freeze drying to contain sumatriptan succinate 14.00 mg, ondansetron hydrochloride 5.0 mg, citric acid 1.68 mg, Na<sub>2</sub>HPO<sub>4</sub> 2.42 mg, polyvinyl chloride 3.0%, mannitol 25%, Me paraben sodium 0.1%, and Pr paraben sodium 0.01%.

ACCESSION NUMBER: 2001:416803 HCAPLUS

DOCUMENT NUMBER: 135:24708

TITLE: A rapid acting freeze-dried oral pharmaceutical composition for treating **migraine**

INVENTOR(S): Venkateswara Rao, Pavuluri; Khadgapathi, Podili

PATENT ASSIGNEE(S): Natco Pharma Limited, India

SOURCE: PCT Int. Appl., 27 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001039836	A1	20010607	WO 2000-IN78	20000825
W:	AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
EP 1246668	A1	20021009	EP 2000-983475	20000825
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL			
PRIORITY APPLN. INFO.:			IN 1999-MA1160	A 19991201

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- TI A rapid acting freeze-dried oral pharmaceutical composition for treating **migraine**
- AB The present invention relates to a novel rapid-acting freeze-dried pharmaceutical composition useful for the treatment of **migraine** and associated symptoms at a reduced total dose of active substance than required for oral administration in the form of. . .
- IT Preservatives  
(antimicrobial; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Vinyl compounds, biological studies  
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(carboxy-containing, polymers; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Gelatins, biological studies  
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(hydrolyzates; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Mouth  
(mucosa, absorption by; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Drug delivery systems  
(oral; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Antimicrobial agents  
(preservatives; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Adrenoceptor agonists  
Allergy inhibitors  
Analgesics  
Anti-inflammatory agents  
Antiemetics  
Antihistamines  
Antimigraine agents  
Buffers  
Coloring materials  
Flavoring materials  
Freeze drying  
Solubilizers  
Stabilizing agents  
Surfactants  
Sweetening agents  
(rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Bile salts  
Carbohydrates, biological studies  
Gelatins, biological studies  
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Fatty acids, biological studies  
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
(salts; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Drug delivery systems  
(tablets; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT Fatty acids, biological studies  
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)

- (unsatd., salts; rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT 113-15-5, Ergotamine 379-79-3, Ergotamine tartrate 525-66-6, Propranolol 99614-01-4, Ondansetron hydrochloride 103628-46-2, Sumatriptan 103628-48-4, Sumatriptan succinate 139264-17-8, Zolmitriptan
- RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
- (rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT 58-38-8, Prochlorperazine 58-73-1, Diphenhydramine **90-82-4**, Pseudoephedrine 103-90-2, Paracetamol 113-92-8, Chlorpheniramine maleate 364-62-5, Metoclopramide 523-87-5, Dimenhydrinate 9003-39-8, Polyvinylpyrrolidone 14838-15-4, Phenylpropanolamine 26159-34-2, Naproxen sodium 50679-08-8, Terfenadine 52468-60-7, Flunarizine 57808-66-9, Domperidone 83881-51-0, Cetirizine 99614-02-5, Ondansetron 109889-09-0, Granisetron
- RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
- (rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT 50-99-7, Dextrose, biological studies 59-23-4, Galactose, biological studies 60-00-4D, Edetic acid, salts 63-42-3, Lactose 69-65-8, D-Mannitol 77-92-9, Citric acid, biological studies 77-92-9D, Citric acid, salts 151-21-3, Sodium lauryl sulfate, biological studies 302-95-4, Sodium deoxycholate 361-09-1, Sodium cholate 516-50-7, Taurodeoxycholic acid 577-11-7, Docusate sodium 863-57-0, Sodium glycocholate 994-36-5, Sodium citrate 1335-30-4, Aluminum silicate 5026-62-0, Methylparaben sodium 7558-79-4 7632-05-5, Sodium phosphate 7647-14-5, Sodium chloride, biological studies 9000-69-5, Pectin 9002-89-5, Polyvinylalcohol 9004-32-4, Carboxymethyl cellulose 9004-53-9, Dextrin 9004-62-0, Hydroxyethyl cellulose 9004-64-2, Hydroxypropyl cellulose 9004-67-5, Methyl cellulose 9005-32-7, Alginic acid 12441-09-7D, Sorbitan, esters 12619-70-4, Cyclodextrin 16409-34-0, Sodium glycodeoxycholate 35285-69-9, Propylparaben sodium 57916-92-4, carbomer 934P 151687-96-6, carbomer 974P
- RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
- (rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)
- IT **90-82-4**, Pseudoephedrine
- RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
- (rapid-acting freeze-dried oral pharmaceuticals for **migraine** treatment)

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

- L5 ANSWER 9 OF 14 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
- AB Patients recovering from alcohol and other drug addiction have unique medical and pharmacological needs. Careful selection of medications can decrease the risk of relapse. Angiotensin-converting enzyme inhibitors and calcium channel-blocking medications are excellent choices to treat hypertension. Most gastrointestinal problems resolve with abstinence and can be treated nonpharmacologically. In managing pain, physicians should avoid narcotics and use non-pharmacological treatment whenever possible. Treating recovering patients with HIV can be challenging because of the side effects of many of the antiviral medications. The newer antiviral

agents have fewer side effects and contraindications. Commonly used remedies for colds and cough can cause a relapse to drug use. Patients with diabetes mellitus need to be monitored very closely in early recovery to prevent hypoglycemia. Frequently a team approach is helpful in managing the medication needs of patients in recovery.

ACCESSION NUMBER: 97311528 EMBASE  
DOCUMENT NUMBER: 1997311528  
TITLE: The integration of medical management with recovery.  
AUTHOR: Schulz J.E.  
CORPORATE SOURCE: Dr. J.E. Schulz, Department of Family Medicine, E. Carolina Univ. School of Medicine, Greenville, NC 27858-4354, United States  
SOURCE: Journal of Psychoactive Drugs, (1997) 29/3 (233-237).  
Refs: 35  
ISSN: 0279-1072 CODEN: JPDRD3  
COUNTRY: United States  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 032 Psychiatry  
037 Drug Literature Index  
038 Adverse Reactions Titles  
040 Drug Dependence, Alcohol Abuse and Alcoholism  
LANGUAGE: English  
SUMMARY LANGUAGE: English  
CT Medical Descriptors:  
\*alcoholism: . . . drug therapy  
heart arrhythmia: SI, side effect  
human  
human immunodeficiency virus infection: DT, drug therapy  
hypertension: DT, drug therapy  
intranasal drug administration  
liver injury: SI, side effect  
migraine: TH, therapy  
migraine: DT, drug therapy  
oral drug administration  
osteoporosis: CO, complication  
pain: DT, drug therapy  
rectal drug administration  
relapse  
respiratory tract disease: DT, drug therapy  
review  
sublingual drug administration  
tension headache: . . .  
RN. . . (codeine) 76-57-3; (colchicine) 64-86-8; (dextromethorphan) 125-69-9, 125-71-3; (diphenoxylate) 3810-80-8, 915-30-0; (librax) 8015-20-1; (loperamide) 34552-83-5, 53179-11-6; (paregoric) 8029-99-0; (propylthiouracil) 51-52-5; (pseudoephedrine) 345-78-8, 7460-12-0, 90-82-4; (testosterone) 58-22-0

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AB **Migraine** has been associated with specific vestibular disorders, including benign paroxysmal vertigo of childhood and benign recurrent vertigo in adults. **Migraine** may also play a role in chronic nonspecific vestibulopathy. Because scant data exist that describe the clinical findings and vestibular function abnormalities in suspected **migraine**-related vestibulopathy, we reviewed the history, physical examination, vestibular tests (electronystagmography, rotational chair, posturography), and response to treatment of 100 patients with diagnoses of **migraine**-related vestibulopathy. Dominant clinical features

included chronic movement- associated dysequilibrium, unsteadiness, space and motion discomfort, and occasionally, episodic vertigo as an aura prior to headache, or true vertigo without headache. Common vestibular test abnormalities included a directional preponderance on rotational testing, unilateral reduced calorie responsiveness, and vestibular system dysfunction patterns on posturography. Treatment was usually directed at the underlying **migraine** condition by identifying and avoiding dietary triggers and prescribing prophylactic anti- **migraine** medications. Symptomatic relief was also provided using anti-motion sickness medications, vestibular rehabilitation, and pharmacotherapy directed at any associated anxiety or panic disorder.

ACCESSION NUMBER: 97086717 EMBASE

DOCUMENT NUMBER: 1997086717

TITLE: **Migraine**-related vestibulopathy.

AUTHOR: Cass S.P.; Furman J.M.; Ankerstjerne J.K.P.; Balaban C.; Yetiser S.; Aydogan B.

CORPORATE SOURCE: Dr. S.P. Cass, Dept of Otolaryngology, University of Pittsburgh, 200 Lothrop St, Pittsburgh, PA 15213, United States

SOURCE: Annals of Otology, Rhinology and Laryngology, (1997) 106/3 (182-189).

Reis: 26

ISSN: 0003-4894 CODEN: AORHA2

COUNTRY: United States

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 008 Neurology and Neurosurgery  
011 Otorhinolaryngology  
037 Drug Literature Index

LANGUAGE: English

SUMMARY LANGUAGE: English

TI **Migraine**-related vestibulopathy.

AB **Migraine** has been associated with specific vestibular disorders, including benign paroxysmal vertigo of childhood and benign recurrent vertigo in adults. **Migraine** may also play a role in chronic nonspecific vestibulopathy. Because scant data exist that describe the clinical findings and vestibular function abnormalities in suspected **migraine**-related vestibulopathy, we reviewed the history, physical examination, vestibular tests (electronystagmography, rotational chair, posturography), and response to treatment of 100 patients with diagnoses of **migraine**-related vestibulopathy. Dominant clinical features included chronic movement- associated dysequilibrium, unsteadiness, space and motion discomfort, and occasionally, episodic vertigo as an. . . rotational testing, unilateral reduced calorie responsiveness, and vestibular system dysfunction patterns on posturography. Treatment was usually directed at the underlying **migraine** condition by identifying and avoiding dietary triggers and prescribing prophylactic anti- **migraine** medications. Symptomatic relief was also provided using anti-motion sickness medications, vestibular rehabilitation, and pharmacotherapy directed at any associated anxiety or. . .

CT Medical Descriptors:

\***migraine**: DI, diagnosis

\***migraine**: DT, drug therapy

\***migraine**: PC, prevention

\***migraine**: ET, etiology

\*vestibular disorder: ET, etiology

\*vestibular disorder: DT, drug therapy

\*vestibular disorder: DI, diagnosis

adolescent

adult

anxiety neurosis: DI, diagnosis  
 anxiety neurosis: ET, etiology  
 anxiety neurosis: TH, . . .  
 RN (amitriptyline) 50-48-6, 549-18-8; (benzodiazepine) 12794-10-4; (diazepam)  
 439-14-5; (promethazine) 58-33-3, 60-87-7; (propranolol) 13013-17-7,  
 318-98-9, 3506-09-0, 4199-09-1, 525-66-6; (pseudoephedrine)  
**345-78-8, 7460-12-0, 90-82-4**; (verapamil)  
 152-11-4, 52-53-9

L5 ANSWER 11 OF 14 HCAPLUS COPYRIGHT 2004 ACS on STN

AB Pharmaceutical tablets capable of virtually instant disintegration for use  
 in chemotherapy, wherein one or more active principles previously coated  
 with a binder are mixed with a cellulose derivative and one or more  
 water-soluble

diluents before powder compression. A tablet contained paracetamol (I)  
 (coated with Et cellulose and corresponding to 500 mg I) 540.5, aspartame  
 15, croscarmellose 90, orange flavors 20, citric acid 30, xylitol 100,  
 microcryst. cellulose 99.5, and magnesium stearate 5 mg.

ACCESSION NUMBER: 1996:304029 HCAPLUS

DOCUMENT NUMBER: 124:325420

TITLE: Pharmaceutical tablets capable of instant  
 disintegration

INVENTOR(S): Vacher, Dominique

PATENT ASSIGNEE(S): Fr.

SOURCE: PCT Int. Appl., 14 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: French

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
<u>WO 9602237</u>	A1	19960201	WO 1995-FR947	19950713
W: AU, BR, CA, CN, CZ, FI, HU, JP, KR, MX, NO, NZ, PL, RU, US				
RW: KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT,				
LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE,				
SN, TD, TG				
FR 2722408	A1	19960119	FR 1994-8811	19940715
FR 2722408	B1	19961004		
AU 9529843	A1	19960216	AU 1995-29843	19950713
EP 725631	A1	19960814	EP 1995-925887	19950713
EP 725631	B1	20030402		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, NL, PT, SE				
AT 235892	E	20030415	AT 1995-925887	19950713
PRIORITY APPLN. INFO.:			FR 1994-8811	A 19940715
			WO 1995-FR947	W 19950713

IT Headache

(**migraine**, inhibitors; pharmaceutical tablets capable of  
 instant disintegration)

IT 50-70-4, Sorbitol, biological studies 50-78-2, Aspirin 58-15-1,  
 Amidopyrine 69-65-8, Mannitol 76-57-3, Codeine 87-99-0, Xylitol  
**90-82-4**, Pseudoephedrine 103-90-2, Paracetamol 469-62-5,  
 Dextropropoxyphene 486-12-4, Triprolidine 585-86-4, Lactitol  
 1069-66-5, Sodium valproate 3789-97-7, Glucuronamide 5003-48-5,  
 Benorilate 5011-34-7, Trimetazidine 9004-32-4, Carboxymethyl cellulose  
 9004-34-6D, Cellulose, alkyl derivs. 9004-57-3, Ethyl cellulose  
 15318-45-3, Thiamphenicol 15687-27-1, Ibuprofen 23779-99-9,  
 Floctafenine 38957-41-4, Emorfazone

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RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (pharmaceutical tablets capable of instant disintegration)

IT **90-82-4**, Pseudoephedrine  
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (pharmaceutical tablets capable of instant disintegration)

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AB This randomized, double-blind, double-dummy, parallel-group trial was initiated to evaluate and compare the tolerability of once-daily astemizole-D capsules (10 mg astemizole/240 mg pseudoephedrine) and twice-daily loratadine-D tablets (5 mg loratadine/120 mg pseudoephedrine), with particular reference to the impact of treatment on quality of sleep. A total of 240 healthy volunteers participated in this study with a treatment duration of 3 days. Astemizole-D consistently produced less sleep impairment than loratadine-D with statistically significant differences in favour of astemizole-D reported for night-time waking on days 4 and 5 ( $P = 0.004$  and  $P = 0.006$ , respectively), as well as for night-time restlessness on day 4 and the total score for all sleep parameters on day 4 ( $P < 0.05$ ). Global evaluations of overall sleep quality at the end of the trial also revealed some statistically significant differences in favour of astemizole-D. Both drugs were well tolerated and there were no differences in the incidence and type of adverse events reported in the two treatment groups. Slight changes in heart rate and blood-pressure were observed in both treatment groups, but these were small and were not considered to be of clinical significance. In conclusion once-daily astemizole-D is well tolerated and appears to cause less sleep impairment than twice-daily loratadine-D.

ACCESSION NUMBER: 95165665 EMBASE  
 DOCUMENT NUMBER: 1995165665  
 TITLE: Astemizole-D causes less sleep impairment than loratadine-D.  
 AUTHOR: Janssens M.M.-L.; Lins R.L.  
 CORPORATE SOURCE: Janssen Research Foundation, Turnhoutsweg 30,B-2340 Beerse, Belgium  
 SOURCE: Journal of International Medical Research, (1995) 23/3 (167-174).  
 ISSN: 0300-0605 CODEN: JIMRBV  
 COUNTRY: United Kingdom  
 DOCUMENT TYPE: Journal; Article  
 FILE SEGMENT: 011 Otorhinolaryngology  
 030 Pharmacology  
 037 Drug Literature Index  
 038 Adverse Reactions Titles  
 LANGUAGE: English  
 SUMMARY LANGUAGE: English  
 CT Medical Descriptors:  
 \*sleep . . . effect  
 adult  
 agitation  
 anorexia: SI, side effect  
 article  
 blood pressure  
 clinical trial  
 concentration loss: SI, side effect  
 controlled study  
 double blind procedure  
 female  
 headache: SI, side effect



heart rate  
human  
human experiment  
hyperactivity: SI, side effect  
male

**migraine: SI, side effect**  
nervousness  
normal human  
oral drug administration  
randomized controlled trial  
restlessness: SI, side effect  
somnolence: SI, side effect  
taste disorder: SI, side effect  
vertigo: SI, side. . .

RN (astemizole) 68844-77-9; (loratadine) 79794-75-5; (pseudoephedrine)  
**345-78-8, 7460-12-0, 90-82-4**

L5 ANSWER 13 OF 14 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED.  
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ACCESSION NUMBER: 90091882 EMBASE

DOCUMENT NUMBER: 1990091882

TITLE: Pharmacologic evaluation of cardiovascular reflex responses  
in **migraine** patients: Lack of central sympathetic  
modulation?.

AUTHOR: Munari L.; Milanese I.; Silvani A.; Bussone G.; Boiardi A.

CORPORATE SOURCE: Neurologic Institute 'C.Besta', Via Celoria 11, 20133  
Milano, Italy

SOURCE: Functional Neurology, (1989) 4/4 (375-378).

ISSN: 0393-5264 CODEN: FUNEE6

COUNTRY: Italy

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 002 Physiology

008 Neurology and Neurosurgery

018 Cardiovascular Diseases and Cardiovascular Surgery

LANGUAGE: English

TI Pharmacologic evaluation of cardiovascular reflex responses in

**migraine** patients: Lack of central sympathetic modulation?.

CT Medical Descriptors:

\*adrenergic system

\*cardiovascular reflex

\*central nervous system

**\*migraine: DI, diagnosis**

**\*migraine: ET, etiology**

adult

clinical article

human

male

female

article

diagnosis

etiology

\*noradrenalin

\*clonidine

\*guanethidine

\*prazosin

\*propranolol

\*pseudoephedrine

RN. . . 1407-84-7, 51-41-2; (clonidine) 4205-90-7, 4205-91-8, 57066-25-8;  
(guanethidine) 55-65-2, 60-02-6, 645-43-2; (prazosin) 19216-56-9,

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19237-84-4; (propranolol) 13013-17-7, 318-98-9, 3506-09-0, 4199-09-1,  
525-66-6; (pseudoephedrine) **345-78-8, 7460-12-0,**  
**90-82-4**

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AB The author's view of **migraine** is that it is an inescapable  
accompaniment of a way of life chosen, or perhaps chanced upon, by some  
people and as such is not likely to be amenable permanently to any drug  
therapy. It is frequently seen in highly successful people at times of  
relaxation after stress and one suspects that it is some kind of  
physiological brake. Where attacks are frequent there is usually some  
underlying psychological disturbance. Attention to the total situation in  
which attacks occur is of paramount importance and it is here that the  
general practitioner has his important and complex part to play.

ACCESSION NUMBER: 74206969 EMBASE

DOCUMENT NUMBER: 1974206969

TITLE: Treatment of headache.

AUTHOR: Barrie M.

CORPORATE SOURCE: Acad. Cent., Oldchurch Hosp., Romford, United Kingdom

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LANGUAGE: English

AB The author's view of **migraine** is that it is an inescapable  
accompaniment of a way of life chosen, or perhaps chanced upon, by some  
people. . .

CT Medical Descriptors:

\*headache

\***migraine**

\*leisure

\*stress

review

\*acetylsalicylic acid

\*atropine

\*butalbital

\*caffeine

\*clonidine

\*cyclizine

\*dihydroergotamine

\*diuretic agent

\*ergometrine maleate

\*ergotamine tartrate

\*methysergide maleate

\*migril

\*paracetamol

\*progesterone

\*pseudoephedrine

methysergide

medihaler

unclassified drug

RN. . . (cyclizine) 303-25-3, 5897-18-7, 82-92-8; (dihydroergotamine)  
511-12-6; (ergometrine maleate) 129-51-1; (ergotamine tartrate) 379-79-3;  
(methysergide maleate) 129-49-7; (paracetamol) 103-90-2; (progesterone)  
57-83-0; (pseudoephedrine) **345-78-8, 7460-12-0,**  
**90-82-4;** (methysergide) 16509-15-2, 361-37-5, 62288-72-6

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